# SSYTC Track Club 2024 OUTDOOR - MEMBER APPLICATION

## (NO REFUNDS)

Personal Information (No information will be released without consent).

Name:(As it appears on Birth Certificate)	Age: Sex: Birthdate:
Address:	Size: YXS YS YM YL YXL AS AM AL AXL
City:	State: ZIP:
Phone:	Email:
Work Phone	_ Cell
- Parent/Guardian Name(s)	
Emergency Contact & Number	
MEDICAL CONDITIONS	(Sports Physical Required with Medical Conditions)

## **Club Membership Application Waiver**

I know that running and volunteering in club races and practices are potentially hazardous activities. I should not enter and run-in club activities unless I am properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work in club races including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing the facts, and in consideration of your acceptance of my application for membership, I and anyone entitled to act on my behalf, waive and release D4G Track Club, its members/volunteers, sponsors, their representatives, and successors from all claims and liabilities of any kind arising out of my participation in these club activities even though liability may rise from negligence or carelessness on the part of the persons named in the waiver.

### Signature: (Parent must sign if entrant is under 18 years of age)

Date:\_\_\_\_\_

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#### Referred by (list current SSYTC Member Name):

Current SSYTC families in good standing that bring new families to the program will be eligible for a \$25 referral bonus per new family. The new family must register, designate on his/her application who they were referred by, and pay on time for the referring family to receive the bonus.

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